## Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Desc Main Document Page 1 of 51

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF VIRGINIA	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	ase):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Charles First name  R Middle name	First name  Middle name	
	Bring your picture identification to your meeting with the trustee.	Allen Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have	ve		
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3057		

Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Desc Main Document Page 2 of 51

Case number (if known) Debtor 1 Charles R Allen

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and		■ I have not used any business name or EINs.  Business name(s)	☐ I have not used any business name or EINs.  Business name(s)			
	doing business as names		Submoss Harrio(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		316 E. Monroe Avenue Alexandria, VA 22301				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Alexandria City	Country			
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
-	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	<ul> <li>Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</li> </ul>			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Desc Main Document Page 3 of 51

Case number (if known) Debtor 1 Charles R Allen

⊃ar	t 2: Tell the Court About	our B	ankruptcy Ca	se					
7.	The chapter of the Bankruptcy Code you are				n of each, see <i>Notice Required by</i> of page 1 and check the appropria	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy te box.			
	choosing to file under	■ Chapter 7							
		□ Cl	hapter 11						
		□ Cl	hapter 12						
		□ Cl	hapter 13						
3.	How you will pay the fee	_	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.						
				pay the fee in installments. If you choose this option, sign and attach the Application for Inc. Fee in Installments (Official Form 103A).					
			but is not req applies to you	equest that my fee be waived (You may request this option only if you are filing for Chapter 7 is not required to, waive your fee, and may do so only if your income is less than 150% of the olies to your family size and you are unable to pay the fee in installments). If you choose this content is the content of the cont					
			the Application	on to Have the	Chapter 7 Filing Fee Waived (Offi	cial Form 103B) and file it with your petition.			
).	Have you filed for bankruptcy within the	■ No							
	last 8 years?	☐ Ye			<b>14</b> 0				
			District		When	Case number			
			District		When When	Case number Case number			
			District		www.	Case Humber			
10.	Are any bankruptcy cases pending or being	■ No	)						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	S.						
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your residence?	■ No	Go to I	ine 12.					
		☐ Ye	es. Has yo	ur landlord ob	tained an eviction judgment again	st you?			
				No. Go to line	<del>2</del> 12.				
				Yes. Fill out <i>li</i> this bankrupto		Judgment Against You (Form 101A) and file it as part of	f		

Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Desc Main Document Page 4 of 51

Debtor 1 Charles R Allen Case number (if known)

Part	Report About Any Bu	sinesses	You Owi	n as a Sole Proprietor	r		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of busine	ess		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, State	& ZIP Code		
	it to this petition.		Chec		to describe your business:		
				Health Care Busines	ss (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real E	state (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as defi	ned in 11 U.S.C. § 101(53A))		
				Commodity Broker (	as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sha				small business debtor, you must attach your most recent balance sheet, statement of		
	For a definition of small	■ No.	Iam	not filing under Chapte	r 11.		
	business debtor, see 11 U.S.C. § 101(51D).			I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.			
		☐ Yes.	I am	iling under Chapter 11	and I am a small business debtor according to the definition in the Bankruptcy Code.		
Part	t 4: Report if You Own or	Have Any	/ Hazardo	ous Property or Any F	Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat	☐ Yes.					
	of imminent and identifiable hazard to public health or safety?	□ Yes.	What is	the hazard?			
	Or do you own any property that needs immediate attention?			diate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?			
	•			N	lumber, Street, City, State & Zip Code		

Debtor 1 Charles R Allen Document Page 5 of 51

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Desc Main Document Page 6 of 51

Case number (if known) Debtor 1 Charles R Allen Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Charles R Allen Signature of Debtor 2 Charles R Allen Signature of Debtor 1 Executed on July 6, 2019 Executed on MM / DD / YYYY MM / DD / YYYY

Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Desc Main Document Page 7 of 51

Debtor 1 Charles R Allen Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Nathan Fisher	Date	July 6, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
Nathan Fisher 37161		
Printed name		
Nathan Fisher		
Firm name		
3977 Chain Bridge Rd., Suite #2		
Fairfax, VA 22030		
Number, Street, City, State & ZIP Code		
Contact phone (703) 691-1642	Email address	
37161 VA		
Bar number & State		

	Case 19-12233-KHI	K Doc 1 Filed (	07/06/19 Entered 07 Lent Page 8 of 51	<sup>7</sup> /06/19 15:28:39	Desc Main
Fill ir	this information to identify you	ır case:			
Debte	Charles R Allen	Middle Name	Last Name		
Debto	or 2 se if, filing) First Name	Middle Name	Last Name		
Unite	d States Bankruptcy Court for the	: EASTERN DISTRICT (	OF VIRGINIA		
Case (if know	number vn)				Check if this is an amended filing
	cial Form 106Sum	s and Liabilities a	nd Certain Statistica	al Information	12/15
inforn	complete and accurate as poss nation. Fill out all of your sched original forms, you must fill out	ules first; then complete t	he information on this form. If	f you are filing amended s	
Part '	1: Summarize Your Assets				
					Your assets Value of what you own
	Schedule A/B: Property (Official 1a. Copy line 55, Total real estate				\$
	1b. Copy line 62, Total personal p	roperty, from Schedule A/B			\$1,000.0

	16. Gopy line 62, Total personal property, from estimate 772	Ψ	1,000.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	1,000.00
Par	2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	37,671.91
	Your total liabilities	\$	37,671.91

Schedule I: Your Income (Official Form 106I) 500.00 Copy your combined monthly income from line 12 of Schedule I..... Schedule J: Your Expenses (Official Form 106J) 440.00 Copy your monthly expenses from line 22c of Schedule J.....

### Part 4: Answer These Questions for Administrative and Statistical Records

Are you filing for bankruptcy under Chapters 7, 11, or 13?

Part 3: Summarize Your Income and Expenses

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- Yes
- What kind of debt do you have?
  - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
  - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Entered 07/06/19 15:28:39 Desc Main Case 19-12233-KHK Doc 1 Filed 07/06/19 Page 9 of 51
Case number (if known) Document

Debtor 1 Charles R Allen

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.

500.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clai	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	9,774.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	9,774.00

Case 19-12233-KHK	Doc 1	Filed 07/06/19	Entered 07/06/19 15:28:39	Desc Mair

		Documen	t Page 10 of 51	
Fill in this infor	mation to identify your	case and this filing:		
Debtor 1	Charles R Allen			
Dobtor 2	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF V	IRGINIA	
Case number _				☐ Check if this is an
				amended filing
~ <i></i>	4004/5			
_	orm 106A/B			
Schedul	e A/B: Prop	erty		12/15
think it fits best. E information. If mor Answer every que	Be as complete and accurate space is needed, attach a stion.	te as possible. If two married paragrate sheet to this form.	e. If an asset fits in more than one category, list beople are filing together, both are equally respondent to the top of any additional pages, write your na	nsible for supplying correct
Part 1: Describe	Each Residence, Building,	, Land, or Other Real Estate Yo	ou Own or Have an Interest in	
1. Do you own or	have any legal or equitable	interest in any residence, bui	lding, land, or similar property?	
No. Go to Pa	rt 2.			
☐ Yes. Where	is the property?			
Part 2: Describe	Your Vehicles			
			les, whether they are registered or not? Inc G: Executory Contracts and Unexpired Lease	
3. Cars, vans, tr	ucks, tractors, sport uti	lity vehicles, motorcycles		
■ No				
☐ Yes				
			vehicles, other vehicles, and accessories ls, snowmobiles, motorcycle accessories	
■ No				
☐ Yes				
5 Add the dolla	ar value of the portion y	ou own for all of your entr	ies from Part 2, including any entries for	40.00
pages you h	ave attached for Part 2.	Write that number here		\$0.00
Part 3: Describe	Your Personal and House	hold Items		
		able interest in any of the fo	ollowing items?	Current value of the
				portion you own? Do not deduct secured claims or exemptions.
	oods and furnishings	linens, china, kitchenware		
■ No	ajor appliarioos, rarritaro,	mono, orima, attorioriware		
☐ Yes. Desc	ribe			
7. Electronics				
Examples: Te in		lio, video, stereo, and digital eras, media players, games	equipment; computers, printers, scanners; mu	usic collections; electronic devices
■ No				
☐ Yes. Desc	ribe			

Official Form 106A/B Schedule A/B: Property page 1

Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Desc Main Page 11 of 51
Case number (if known) Document Debtor 1 **Charles R Allen** 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ☐ No ■ Yes. Describe..... \$400.00 Exercise Equipment 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... **Debtors' Clothing** \$450.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list □ No Yes. Give specific information..... Books, Pictures, Small \$120.00 **Household Items** 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$970.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ No

Cash

\$20.00

Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Desc Main Document Page 12 of 51

Debtor 1 **Charles R Allen** 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ■ No ☐ Yes..... Institution name: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and ioint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own?

Official Form 106A/B Schedule A/B: Property page 3

Do not deduct secured claims or exemptions.

Debto	r 1 Charles R Allen	Document P	age 13 of 51 Case number	r (if known)	
	x refunds owed to you				
	•				
`	Yes. Give specific information a	bout them, including whether you already	filed the returns and the tax year	ars	
				_	
		Federal & State Income Ta	x Refunds Federa	al & State	\$10.00
	•	alimony, spousal support, child support,	maintenance, divorce settlemen	nt, property settlement	
	Yes. Give specific information				
		<b>you</b> ity insurance payments, disability benefit s you made to someone else	s, sick pay, vacation pay, worke	ers' compensation, So	cial Security
	No	•			
	Yes. Give specific information.				
		e insurance; health savings account (HS	A); credit, homeowner's, or rente	er's insurance	
	Yes. Name the insurance comp	any of each policy and list its value.			
	Cor	npany name:	Beneficiary:	Surr valu	ender or refund e:
lf : sc ■ 1	you are the beneficiary of a livi omeone has died.	due you from someone who has died ng trust, expect proceeds from a life insur	ance policy, or are currently enti	itled to receive properl	y because
	xamples: Accidents, employme	nether or not you have filed a lawsuit on the disputes, insurance claims, or rights to		t	
<b>-</b> \	Yes. Describe each claim				
		Possible personal injury clai car on Route 50 in July 2017	m stemming from being hi	t by a	Unknown
34. <b>Ot</b> l	•	ted claims of every nature, including c	ounterclaims of the debtor an	d rights to set off cla	nims
	Yes. Describe each claim				
35. <b>A</b> n	ny financial assets you did no	t already list			
	Yes. Give specific information.				
	-	our entries from Part 4, including any nere			\$30.00
Part 5:	Describe Any Business-Relate	d Property You Own or Have an Interest In.	ist any real estate in Part 1.		
37. <b>Do</b>	you own or have any legal or eq	itable interest in any business-related prop	erty?		
	o. Go to Part 6.				
$\square$ Y	es. Go to line 38.				

Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Desc Main Page 14 of 51
Case number (if known) Document Debtor 1 **Charles R Allen** Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 56. \$0.00 57. Part 3: Total personal and household items, line 15 \$970.00 Part 4: Total financial assets, line 36 58. \$30.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00

\$0.00

Copy personal property total

\$1,000.00

Official Form 106A/B Schedule A/B: Property page 5

Part 7: Total other property not listed, line 54

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

61.

\$1,000.00

\$1,000.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Charles R Allen			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F VIRGINIA	
Case number (if known)				Charle if this is
(II KHOWH)				☐ Check if this is amended filing

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exem	ptions are	you claiming?	Check one only	, even if	your spouse is	filing with	vou.
----	-------------------	------------	---------------	----------------	-----------	----------------	-------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Exercise Equipment Line from Schedule A/B: 9.1	\$400.00		\$400.00	Va. Code Ann. § 34-4
Zino nom concada 772.			100% of fair market value, up to any applicable statutory limit	
Debtors' Clothing Line from Schedule A/B: 11.1	\$450.00		\$450.00	Va. Code Ann. § 34-26(4)
Ellie Hoff Goredale 742. 11.1			100% of fair market value, up to any applicable statutory limit	
Books, Pictures, Small Household Items	\$120.00		\$120.00	Va. Code Ann. § 34-4
Line from Schedule A/B: 14.1			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$20.00		\$20.00	Va. Code Ann. § 34-4
Ellie Hoff Goredale 742. 10.1			100% of fair market value, up to any applicable statutory limit	
Federal & State: Federal & State	\$10.00		\$10.00	Va. Code Ann. § 34-4
Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	

Entered 07/06/19 15:28:39 Case 19-12233-KHK Filed 07/06/19 Document Page 16 of 51 Case number (if known) Debtor 1 Charles R Allen Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Possible personal injury claim Va. Code Ann. § 34-28.1 Unknown \$1.00 stemming from being hit by a car on Route 50 in July 2017 100% of fair market value, up to Line from Schedule A/B: 33.1 any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Doc 1

Yes

Desc Main

		1212111		
Fill in this infor	mation to identify your	case:		
Debtor 1	Charles R Allen			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F VIRGINIA	
Case number				
(if known)				☐ Check if this is amended filing

## Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

Ouse	. 10 12200 Kilik	Document Page	e 18 of 51	7.00 Best Main
Fill in this infor	mation to identify your ca			
Debtor 1	Charles R Allen			
Debter 1	First Name	Middle Name Last Nar	ame	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name Last Nar	ame	
United States Ba	ankruptcy Court for the:	ASTERN DISTRICT OF VIRGINIA		
Case number				
(if known)				☐ Check if this is an
				amended filing
	/F: Creditors Wh	Have Unsecured Claim		12/15
Schedule G: Execu Schedule D: Credit eft. Attach the Con name and case nu	utory Contracts and Unexpire tors Who Have Claims Secure ntinuation Page to this page. mber (if known).	could result in a claim. Also list execut Leases (Official Form 106G). Do not inc I by Property. If more space is needed, o you have no information to report in a F	clude any creditors with partially secu copy the Part you need, fill it out, nun	ured claims that are listed in nber the entries in the boxes on the
	II of Your PRIORITY Unse ors have priority unsecured o			
No. Go to F	. ,	ams against you.		
Yes.	fail 2.			
☐ Yes.				
Part 2: List A	II of Your NONPRIORITY	nsecured Claims		
3. Do any credit	ors have nonpriority unsecur	d claims against you?		
☐ No. You ha	ive nothing to report in this part.	Submit this form to the court with your other	er schedules.	
Yes.		ŕ		
unsecured clai	m, list the creditor separately for	s in the alphabetical order of the creditor each claim. For each claim listed, identify v e other creditors in Part 3.lf you have more	what type of claim it is. Do not list claims	s already included in Part 1. If more
4.1 Alexan	dria Emergency Physic	an Last 4 digits of account num	mber 9918	\$827.00
	y Creditor's Name			Ψ021.00
	ox 37615	When was the debt incurred		
	ore, MD 21297 Street City State Zip Code	As of the date you file, the cl	claim is: Check all that apply	
	urred the debt? Check one.	As of the date you me, the of	nam is. Shock an that apply	
■ Debto		☐ Contingent		
☐ Debto	•	☐ Unliquidated		
	r 1 and Debtor 2 only	☐ Disputed		
	st one of the debtors and anoth	_ '	ecured claim:	
	c if this claim is for a commu	По		
debt	Cir ciris Ciaim is IOI a COIIIIIU		a separation agreement or divorce that y	ou did not
Is the cla	im subject to offset?	report as priority claims		
■ No		☐ Debts to pension or profit-s	sharing plans, and other similar debts	
☐ Yes		■ Other Specify Medica	al Bill	

Page 19 of 51 Case number (if known) Document Debtor 1 Charles R Allen 4.2 \$918.00 **AMCB** Last 4 digits of account number 9255 Nonpriority Creditor's Name P.O. Box 37007 When was the debt incurred? Baltimore, MD 21297-3007 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Account ☐ Yes 4.3 **AMCB** Last 4 digits of account number 8861 \$1,707.00 Nonpriority Creditor's Name P.O. Box 37007 When was the debt incurred? Baltimore, MD 21297-3007 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Bill** Other. Specify 4.4 **Bestpractices** Last 4 digits of account number \$3,843.00 Nonpriority Creditor's Name P.O. Box 75567 When was the debt incurred? Baltimore, MD 21275 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated

□ Debtor 1 only □ Contingent
□ Debtor 2 only □ Disputed
□ At least one of the debtors and another
□ Check if this claim is for a community debt
Is the claim subject to offset?
□ No □ Debtor 1 only □ Disputed
Type of NONPRIORITY unsecured claim:
□ Student loans
□ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
□ Debts to pension or profit-sharing plans, and other similar debts
□ Yes □ Other. Specify Medical Bills

Page 20 of 51 Case number (if known) Document Debtor 1 Charles R Allen 4.5 \$783.00 **County of Arlington** Last 4 digits of account number 5802 Nonpriority Creditor's Name 2100 Clarendon Blvd., Ate. 217 When was the debt incurred? Arlington, VA 22201 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Fees 4.6 **ECMC Group** Last 4 digits of account number 0002 \$5,560.00 Nonpriority Creditor's Name 111 Washington Ave South When was the debt incurred? Opened 5/28/15 **Suite 1400** Minneapolis, MN 55401 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not debt Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ☐ Other. Specify Educational 4.7 **ECMC Group** Last 4 digits of account number 0001 \$4.214.00 Nonpriority Creditor's Name 111 Washington Ave South When was the debt incurred? Opened 5/28/15 **Suite 1400** Minneapolis, MN 55401 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

Other. Specify

Debts to pension or profit-sharing plans, and other similar debts

Educational

Is the claim subject to offset?

Fairfax County Fire & Rescue	Last 4 digits of account number 2582	\$682.00
Nonpriority Creditor's Name P.O. Box 18008 Merrifield, VA 22118-0010	When was the debt incurred?	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
$\square$ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you report as priority claims	did not
No	□ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical Bill	
I C System Inc	Last 4 digits of account number 1973	\$2,392.00
Nonpriority Creditor's Name	<u> </u>	
Attn: Bankruptcy P.O. Box 64378	When was the debt incurred? Opened 08/18	
St. Paul, MN 55164		
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you report as priority claims	did not
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Collection - American Anesthesiology Virginia	Of

2990 Telestar Court When was the debt incurred? Falls Church, VA 22042 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: lacksquare At least one of the debtors and another ☐ Student loans  $\hfill\square$  Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical Bill

Last 4 digits of account number

3161

4.1 0

Inova

Nonpriority Creditor's Name

\$1,880.00

Debtor	1 Charles R Allen	Document Page	e 22 of 51 Case number (if known)	
4.1 1	NE Virginia Emergency	Last 4 digits of account num	ber	\$1,664.00
	Nonpriority Creditor's Name P.O. Box 37993 Philadelphia, PA 19101	When was the debt incurred	?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the cl	aim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unse	cured claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a report as priority claims	separation agreement or divorce that you did	I not
	■ No	Debts to pension or profit-s	haring plans, and other similar debts	
	Yes	Other. Specify Medica	l Bill	
4.1	State Farm Auto Insurance Nonpriority Creditor's Name	Last 4 digits of account num	ber <u>2879</u>	\$13,035.91
	c/o McKenry Dancigers Dawson 192 Ballard Court, Ste. 400 Virginia Beach, VA 23462	When was the debt incurred	? 2010	
	Number Street City State Zip Code	As of the date you file, the cl	aim is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unse	cured claim:	
	$\square$ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a report as priority claims	separation agreement or divorce that you did	I not
	■ No	Debts to pension or profit-s	haring plans, and other similar debts	
	Yes	Other. Specify Judgmo	ent	
4.1	YMCA Alexandria	Last 4 digits of account num	ber	\$166.00
	Nonpriority Creditor's Name c/o Transworld Systems 500 Virginia Drive, Ste. 514 Fort Washington, PA 19034	When was the debt incurred	?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the cl	aim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unse	cured claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a report as priority claims	separation agreement or divorce that you did	Inot

Part 3: List Others to Be Notified About a Debt That You Already Listed

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

■ No

☐ Yes

■ Other. Specify Services

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Desc Main Document Page 23 of 51
Charles P Allen

Debtor 1 Charles R Allen Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Alexandria Emergency Physician Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 37615 Part 2: Creditors with Nonpriority Unsecured Claims Baltimore, MD 21297 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **AMCB** Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 37005 Part 2: Creditors with Nonpriority Unsecured Claims Baltimore, MD 21297-3005 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address American Anesthesiology Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 535386 Part 2: Creditors with Nonpriority Unsecured Claims Atlanta, GA 30353 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **AR Resources** Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 1056 ■ Part 2: Creditors with Nonpriority Unsecured Claims Blue Bell, PA 19422 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Equian** Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 32710 Part 2: Creditors with Nonpriority Unsecured Claims Louisville, KY 40232 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Fairfax Anesthesiology Assoc. Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 18138 Part 2: Creditors with Nonpriority Unsecured Claims Merrifield, VA 22118-0138 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Fairfax County Fire & Rescue Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 630232 Part 2: Creditors with Nonpriority Unsecured Claims Baltimore, MD 21263 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **GC Services** Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 1022 Part 2: Creditors with Nonpriority Unsecured Claims Wixom, MI 48393 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Inova Line **4.3** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 37013 ■ Part 2: Creditors with Nonpriority Unsecured Claims Baltimore, MD 21297 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Inova Alexandria Hospital** Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 37022 ■ Part 2: Creditors with Nonpriority Unsecured Claims Baltimore, MD 21297-3022 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Pioneer Credit Recovery Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 92 ■ Part 2: Creditors with Nonpriority Unsecured Claims Arcade, NY 14009 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Suburban Credit Corp Line 4.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 30640 Part 2: Creditors with Nonpriority Unsecured Claims Alexandria, VA 22310

Official Form 106 E/F

# Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Desc Main Debtor 1 Charles R Allen Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Desc Main December 1 Case number (if known)

Charles K Allen		Case Harriser (il known)
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2	2 did you list the original creditor?
Suburban Credit Corp	Line <b>4.1</b> of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
6142 Franconia Road P.O. Box 30640 Alexandria, VA 22310		■ Part 2: Creditors with Nonpriority Unsecured Claims
Alexandra, VA 22010	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2	2 did you list the original creditor?
Virginia DMV	Line 4.12 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
2300 West Broad Street P.O. Box 27412 Richmond, VA 23269		Part 2: Creditors with Nonpriority Unsecured Claims
Richinona, VA 23209	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2	2 did you list the original creditor?
Virginia DMV	Line <b>4.12</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims
P.O. box 27412 P.O. Box 27412 Richmond, VA 23269-0001		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	

## Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				•	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
Total	6f.	Student loans	6f.	\$	9,774.00
claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	27,897.91
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	37,671.91

		1200000		
Fill in this infor	mation to identify your	case:		
Debtor 1	Charles R Allen			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F VIRGINIA	
Case number (if known)				☐ Check if this is an
				amended filing

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.3					
0	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
	J.,		State		

		Docume	<u>nt Page 26 d</u>	ot 51	-
Fill in this	information to identify your	case:			
Debtor 1	Charles P Allen				
Deptor 1	Charles R Allen First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing	ng) First Name	Middle Name	Last Name		
United Sta	ites Bankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA		
_					
Case num (if known)	ber				☐ Check if this is an
()					amended filing
					1
Officia	I Form 106H				
	lule H: Your Cod	obtore			40/45
Sched	iule n. Tour Cou	enrois			12/15
	and case number (if known you have any codebtors? (If			e as a codebtor.	
■ No □ Yes	S				
Arizon ■ No. □ Yes	na, California, Idaho, Louisiana Go to line 3. s. Did your spouse, former spo	, Nevada, New Mexico, Pu use, or legal equivalent live	erto Rico, Texas, Wash	ningtòn, and Wisconsin.	,
in line Form	e 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed t	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cr Check all schedul	reditor to whom you owe the debt les that apply:
24				_	,
3.1	Name			Schedule D, lin	
				☐ Schedule E/F,☐ Schedule G, lii	
				□ Schedule G, III	ne
	Number Street	_		<del></del>	
	City	State	ZIP Code		
3.2				☐ Schedule D, lir	00
	Name			Schedule E/F,	
				☐ Schedule G, lii	
				— Scriedule G, III	<u></u>
	Number Street	<b>.</b>	715.0		
	City	State	ZIP Code		

# Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Desc Main Document Page 27 of 51

						_				
	in this information to identify your c									
De	btor 1 Charles R A	lllen			_					
1 -	btor 2				_					
Un	ited States Bankruptcy Court for the	e: _EASTERN DISTRICT	OF VIRGINIA							
1	se number		-				c if this is:			
(IT K	nown)					l	n amende	Ü	g postpetition	chapter
									llowing date:	
0	fficial Form 106I					M	M / DD/ Y	YYY		
S	chedule I: Your Inc	ome								12/1
spo	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  It 1: Describe Employment	ır spouse is not filing wi	ith you, do not inclu	de infori	nati	on about	your spo	ouse. If mo	re space is	needed,
1.	Fill in your employment		5.17				514			
1.	information.		Debtor 1				_		ing spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	<ul><li>■ Employed</li><li>□ Not employed</li></ul>				☐ Employed ☐ Not employed			
	employers.	Occupation	Unemployed							
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed to	here?				_			
Pa	rt 2: Give Details About Mo	nthly Income								
	imate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to r	eport for	any	line, write	\$0 in the	space. Inc	lude your no	n-filing
If yo	ou or your non-filing spouse have m e space, attach a separate sheet to	ore than one employer, co	ombine the informatio	n for all e	mpl	oyers for t	hat perso	n on the lir	nes below. If	you need
						For Deb	otor 1		otor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	N/A	-
3.	Estimate and list monthly over	ime pay.		3.	+\$		0.00	+\$	N/A	-
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$		0.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

# Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Desc Main Document Page 28 of 51

Deb	tor 1	Charles R Allen	_	C	Case r	number (if i	known)				
					For	Debtor 1			or Debtor		
	Cop	y line 4 here	4.		\$		0.00	\$		N/A	-
5.	List	all payroll deductions:									
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.		\$ \$		0.00	\$		N/A N/A	- -
	5c. 5d. 5e.	Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance	5c. 5d. 5e.		\$ \$		0.00 0.00 0.00	\$ \$ \$		N/A N/A N/A	- -
	5f. 5g.	Domestic support obligations Union dues	5f. 5g.		\$ 		0.00	\$		N/A N/A	- - -
6.	5h.	Other deductions. Specify: the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 5h. 6.		\$ \$		0.00	+ \$		N/A N/A	-
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		Ψ \$		0.00	φ \$		N/A N/A	-
8.		all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		<b>\$</b>		0.00	\$		N/A	-
	8b.	Interest and dividends	8b.		<b>\$</b> —		0.00	\$		N/A	-
	8c. 8d.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation	8c. 8d.		\$ \$		0.00 0.00	\$		N/A N/A	-
	8e.	Social Security	8e.		\$		0.00	\$		N/A	-
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.		\$		0.00	\$		N/A	-
	8g. 8h.	Pension or retirement income Other monthly income. Specify: Assistance from parents	8g. 8h.		\$		0.00	\$ + \$		N/A N/A	-
9.		all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	<u> </u>		0.00	\$		N/A	- A
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		500.00	+ \$		N/A	= \$	500.00
11.	<ul> <li>11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Sc Specify:</li> </ul>									e J. +\$	0.00
12.	Writ	dd the amount in the last column of line 10 to the amount in line 11. The rest trite that amount on the Summary of Schedules and Statistical Summary of Certain								\$	500.00
13.	Do y	ou expect an increase or decrease within the year after you file this form	?							Combir monthly	ned y income
	_	Yes Explain:									

# Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Desc Main Document Page 29 of 51

-HII	in this informa	ition to identify yo	our caca:						
						01			
Deb	tor 1	Charles R Al	llen			Ch	eck if this is: An amend	ad filing	
Deb	tor 2							U	wing postpetition chapter
(Spc	ouse, if filing)					_			the following date:
Unit	ed States Bankr	ruptcy Court for the	: EASTE	RN DISTRICT OF VIRGIN	IA		MM / DD /	YYYY	
	e number								
(11 10									
Of	fficial Fo	rm 106J							
Sc	chedule	J: Your	Exper	nses					12/15
Be info	as complete a	and accurate as	possible eded, atta	. If two married people are ich another sheet to this t					
Par 1.	t 1: Descr Is this a joir	ribe Your House	hold						
١.	No. Go to								
			in a separ	ate household?					
	_ : 35: 2 € €								
	= ::	-	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of De	ebtor 2.		
2.	Do you have	e dependents?	■ No						
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependage	dent's	Does dependent live with you?
	Do not state	the							□ No
	dependents	names.							☐ Yes
									□ No
									☐ Yes
									□ No □ Yes
									□ No
									☐ Yes
3.		penses include		No					33
		f people other t d your depende		Yes					
Est exp	imate your ex	ate Your Ongoi openses as of you a date after the l	our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp	ou are using this fo lemental <i>Schedul</i> e	orm as a s <i>J</i> , check	supplement the box at t	in a Cha he top o	apter 13 case to report of the form and fill in the
the		h assistance an		government assistance it cluded it on <i>Schedule I:</i> Y			Y	our exp	enses
4.	The rental of	or home owners	hip expen	ses for your residence. In	nclude first mortgage				0.55
	payments ar	nd any rent for th	e ground o	or lot.		4.	\$		0.00
	If not includ	led in line 4:							
		estate taxes				4a.			0.00
		rty, homeowner's				4b.	·		0.00
		maintenance, re owner's associat		upkeep expenses dominium dues		4c. 4d.	·		0.00
5.				our residence, such as ho	me equity loans	5.	·		0.00

# Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Desc Main Document Page 30 of 51

Debtor	1 Charles R Allen	Case num	ber (if known)	
6. <b>U</b> t	ilities:			
6a		6a.	\$	0.00
6b	•	6b.	\$	0.00
60		6c.	·	0.00
60		6d.	·	0.00
	pod and housekeeping supplies	7.	·	350.00
	nildcare and children's education costs	8.	\$	0.00
_	othing, laundry, and dry cleaning	9.	\$	30.00
	ersonal care products and services	10.	· -	
	·		·	30.00
	edical and dental expenses ansportation. Include gas, maintenance, bus or train fare.	11.	\$	0.00
	o not include car payments.	12.	\$	0.00
	ntertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	30.00
	naritable contributions and religious donations	14.	\$	0.00
	surance.		*	
	o not include insurance deducted from your pay or included in lines 4 or 20.			
	ia. Life insurance	15a.	\$	0.00
15	b. Health insurance	15b.	\$	0.00
15	ic. Vehicle insurance	15c.	\$	0.00
	id. Other insurance. Specify:	15d.	·	0.00
	exes. Do not include taxes deducted from your pay or included in lines 4 or 20.		-	0.00
Sp	pecify:	16.	\$	0.00
	stallment or lease payments:			
	a. Car payments for Vehicle 1	17a.	· -	0.00
	b. Car payments for Vehicle 2	17b.	·	0.00
	c. Other. Specify:	17c.	· .	0.00
	'd. Other. Specify:	17d.	\$	0.00
	our payments of alimony, maintenance, and support that you did not report as	18.	\$	0.00
	educted from your pay on line 5, Schedule I, Your Income (Official Form 106I). ther payments you make to support others who do not live with you.	10.	\$	
	ner payments you make to support others who do not live with you.	19.	Φ	0.00
	ther real property expenses not included in lines 4 or 5 of this form or on <i>Sche</i>		our Income	
	na. Mortgages on other property	20a.		0.00
	b). Real estate taxes	20b.		0.00
	c. Property, homeowner's, or renter's insurance	20c.	·	0.00
	od. Maintenance, repair, and upkeep expenses	20d.	·	
	De. Homeowner's association or condominium dues	20d. 20e.		0.00
			·	0.00
. 01	ther: Specify:	21.	+\$	0.00
	alculate your monthly expenses			
	2a. Add lines 4 through 21.		\$	440.00
22	2b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22	c. Add line 22a and 22b. The result is your monthly expenses.		\$	440.00
3. <b>C</b> :	alculate your monthly net income.			
	Ba. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	500.00
	Bb. Copy your monthly expenses from line 22c above.	23b.		440.00
20	2. Copy year monany expenses from the 220 above.	200.		440.00
23	sc. Subtract your monthly expenses from your monthly income.			22.22
	The result is your monthly net income.	23c.	\$	60.00
4. <b>D</b> o	o you expect an increase or decrease in your expenses within the year after yo	ou file this	form?	
Fo	r example, do you expect to finish paying for your car loan within the year or do you expect your			or decrease because o
	odification to the terms of your mortgage?			
	No			
	Voc Evolain here:			

# Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Desc Main Document Page 31 of 51

Fill in this int	formation to identify your	case:			
Debtor 1	Charles R Allen				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA		
Case number	r				
(if known)					☐ Check if this is an amended filing
If two married You must file obtaining mo	ation About and people are filing together this form whenever you finney or property by fraud in 1.18 U.S.C. §§ 152, 1341, 1	, both are equally respor le bankruptcy schedules a connection with a bank	nsible for supplying corre	ect information.  Making a false statement,	
S	Sign Below				
Did you	pay or agree to pay some	one who is NOT an attori	ney to help you fill out bar	nkruptcy forms?	
■ No					
☐ Yes	s. Name of person				Petition Preparer's Notice, ignature (Official Form 119)
	enalty of perjury, I declare vare true and correct.	that I have read the sumi	mary and schedules filed	with this declaration and	
X /s/ C	Charles R Allen		X		
Cha	rles R Allen		Signature of D	ebtor 2	
Signa	ature of Debtor 1				
Date	July 6, 2019		Date		

# Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Desc Main Document Page 32 of 51

Eill	in this inform	nation to identify you	r 00001								
		nation to identify you	case.								
Deb	otor 1	Charles R Allen First Name	Middle Name	Last Name							
Deb	otor 2										
(Spo	use if, filing)	First Name	Middle Name	Last Name							
Unit	ted States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF	VIRGINIA							
Cas (if kn	se number own)					Check if this is an mended filing					
Sta Be a	s complete a	of Financial and accurate as possione space is needed,	attach a separate sheet to	re filing together, both are	ankruptcy equally responsible for sup additional pages, write you						
	<u> </u>	n). Answer every ques Details About Your Ma	stion. nrital Status and Where You	Lived Before							
1.	What is you	r current marital statu	us?								
	<ul><li>☐ Married</li><li>■ Not mai</li></ul>	ried									
2.	During the la	Ouring the last 3 years, have you lived anywhere other than where you live now?									
	<ul> <li>No</li> <li>Yes. List all of the places you lived in the last 3 years. Do not include where you live now.</li> </ul>										
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there					
					ity property state or territor ico, Texas, Washington and V						
	■ No □ Yes. Ma	ike sure you fill out <i>Scl</i>	nedule H: Your Codebtors (Of	ificial Form 106H).							
Par	Explai	n the Sources of You	r Income								
4.	Fill in the total	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?					
	□ No ■ Yes. Fil	in the details.									
			Debtor 1		Debtor 2						
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)					
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips						
			☐ Operating a business		☐ Operating a business						

Official Form 107

Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Desc Main Page 33 of 51
Case number (if known) Document

Debtor 1 Charles R Allen

		Debtor 1		Debtor 2	
		Sources of income Check all that apply.  Gross income (before deductions and exclusions)		Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2018)		■ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
For the calendar year b		■ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
Include income rega and other public ben winnings. If you are	rdless of wheth efit payments; illing a joint cas	e during this year or the two ler that income is taxable. Exa pensions; rental income; inter le and you have income that y ly me from each source separat	amples of other income are all lest; dividends; money collect you received together, list it or	ed from lawsuits; royalties; ar ally once under Debtor 1.	
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
Part 3: List Certain F	ayments You	Made Before You Filed for I	Bankruptcy		
□ No. Neither individual  During the □ No. □ Yes  * Subject ■ Yes. Debtor 1 During the	Debtor 1 nor E I primarily for a e 90 days befor Go to line 7 List below e paid that cr not include at to adjustmen or Debtor 2 o e 90 days befor	each creditor to whom you paideditor. Do not include payment payments to an attorney for the con 4/01/22 and every 3 years or both have primarily consume you filed for bankruptcy, discontinuation.	Imer debts. Consumer debts d purpose."  d you pay any creditor a total d a total of \$6,825* or more in the for domestic support obligations bankruptcy case. Is after that for cases filed on the commer debts.	of \$6,825* or more?  n one or more payments and ations, such as child support ator after the date of adjustmen	the total amount you and alimony. Also, do
■ No. □ Yes	include pay	each creditor to whom you pai- ments for domestic support ol this bankruptcy case.			
Creditor's Name a	nd Address	Dates of payme	nt Total amount	Amount you Was this	payment for

paid

still owe

Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Page 34 of 51 Document ase number (if known) Debtor 1 Charles R Allen Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Reason for this payment Dates of payment **Total amount** Amount you still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο П Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Describe the Property Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?
No

☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person

Describe the gifts

Dates you gave the gifts

Value

Person to Whom You Gave the Gift and Address:

Official Form 107

Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Desc Main Page 35 of 51 Case number (if known) Document Debtor 1 Charles R Allen 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Nο Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You June 2019 **DECAF** \$30.00 \$30.00 114 Goliad Street Fort Worth, TX 76126 Nathan Fisher \$500.00 June 2019 \$500.00 3977 Chain Bridge Rd., #2 Fairfax, VA 22030-3308 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

Official Form 107

Yes. Fill in the details.

Person Who Received Transfer Address

Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

Person's relationship to you

Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Desc Main Page 36 of 51
Case number (if known) Document

Debtor 1 Charles R Allen

19.	beneficiary? (These are often called asset-prot		ny property to a	self-settle	d trust or similar device	of which you are a	1			
	☐ Yes. Fill in the details.									
	Name of trust	Description and	Description and value of the property transferred							
Pa	rt 8: List of Certain Financial Accounts, Inst	truments, Safe Deposi	t Boxes, and St	orage Unit	s					
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, assoc No	other financial accou	nts; certificates	of deposi		,				
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number			Date account was closed, sold, moved, or transferred	Last balanc before closing c transfe				
21.	cash, or other valuables?	ear before you filed fo	r bankruptcy, ar	ny safe dep	oosit box or other depos	itory for securities	i,			
	■ No □ Yes. Fill in the details.									
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?				
22.	Have you stored property in a storage unit of	r place other than you	r home within 1	year befor	e you filed for bankrupte	cy?				
	■ No □ Yes. Fill in the details.									
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe	the contents	Do you still have it?				
Pa	rt 9: Identify Property You Hold or Control f	or Someone Else								
23.	Do you hold or control any property that son for someone.	neone else owns? Incl	ude any propert	y you borr	rowed from, are storing t	for, or hold in trus	t			
	■ No □ Yes. Fill in the details.									
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property	Val	ue			
	rt 10: Give Details About Environmental Info									
		e air, land, soil, surfac	e water, ground	• .			or			
toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.  Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or u to own, operate, or utilize it, including disposal sites.										

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

hazardous material, pollutant, contaminant, or similar term.

Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Desc Main Document Page 37 of 51 Case number (if known)

Debtor 1 Charles R Allen

24.	Has any governmental unit notified you that y	ou may be liable or potentially liable u	nder or in violation of an environm	ental law?					
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of a	ny release of hazardous material?							
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or admi	nistrative proceeding under any enviro	onmental law? Include settlements	and orders.					
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Par	11: Give Details About Your Business or Co	onnections to Any Business							
27.	Within 4 years before you filed for bankruptcy	y, did you own a business or have any	of the following connections to any	y business?					
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
	☐ A partner in a partnership								
	☐ An officer, director, or managing executive of a corporation								
	☐ An owner of at least 5% of the voting or equity securities of a corporation								
	No. None of the above applies. Go to Part 12.								
	☐ Yes. Check all that apply above and fill ir	the details below for each business.							
		Describe the nature of the business	Employer Identification numbe						
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security  Dates business existed	number of ITIN.					
28.	Within 2 years before you filed for bankruptcy institutions, creditors, or other parties.	y, did you give a financial statement to	anyone about your business? Incl	ude all financial					
	■ No □ Yes. Fill in the details below.								
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued							

Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Desc Main Page 38 of 51
Case number (if known) Document

Debtor 1 Charles R Allen

Part	12: Sign Below		
are tru	ue and correct. I understand that m	nt of Financial Affairs and any attachments, and I deaking a false statement, concealing property, or obes up to \$250,000, or imprisonment for up to 20 year	taining money or property by fraud in connection
/s/ C	harles R Allen		
Cha	les R Allen	Signature of Debtor 2	
Sign	ature of Debtor 1		
Date	July 6, 2019	Date	
Did yo	ou attach additional pages to Your	Statement of Financial Affairs for Individuals Filing	for Bankruptcy (Official Form 107)?
■ No			
☐ Ye	S		
Did yo	., ,	no is not an attorney to help you fill out bankruptcy	forms?

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

### Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Desc Main Document Page 39 of 51

Debtor 1	Charles R Allen			
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States B	ankruptcy Court for the:	EASTERN DISTRICT O	DF VIRGINIA	
Case number				
if known)				<ul><li>Check if this is an amended filing</li></ul>
Official Ed	orm 108			· ·
			_	
		n for Individu	ıals Filing Under Chapte	r <b>7</b> 12/1
	nt of Intentio	ni ioi inaiviat	adio i illing Offaci Offapic	12/10
	nt of Intentio	on for marviat	dais i ming offact offapte	1271

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

# Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Desc Main Document Page 40 of 51

Debtor 1 Charles R Allen	Case number (if kr	nown)
name:  Description of	☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	Retain the property and [explain]:	
securing debt:	Tretain the property and [explain].	
	e that you listed in Schedule G: Executory Contracts and Unex	
	state leases. Unexpired leases are leases that are still in effect roperty lease if the trustee does not assume it. 11 U.S.C. § 365	
Describe your unexpired personal proper	ty leases	Will the lease be assumed?
Lessor's name:		□ No
Description of leased		
Property:		☐ Yes
Lessor's name:		□ No
Description of leased		_
Property:		☐ Yes
Lessor's name:		□ No
Description of leased		
Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		
Property.		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name:		□ No
Description of leased		_ 140
Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Part 3: Sign Below		
	ave indicated my intention about any property of my estate tha	nt secures a debt and any personal
property that is subject to an unexpired lea		• •
X /s/ Charles R Allen Charles R Allen	X Signature of Debtor 2	
Signature of Debtor 1	Signature of Debior 2	
Date <b>July 6, 2019</b>	Date	
, -,		

Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Desc Main

# Document Page 41 of 51 United States Bankruptcy Court

Factorn	<b>District</b> 6	of Viro	rinia
Lastern	DISTITICT O	DI VILS	ziiiia

In i	re Charles R Allen		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPEN	ISATION OF ATTO	ORNEY FOR I	<u>DEBTOR</u>
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2 compensation paid to me, for services rendered or to be bankruptcy case is as follows:			
	For legal services, I have agreed to accept		\$	1,165.00
	Prior to the filing of this statement I have received		\$	500.00
	Balance Due			665.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify)			
3.	The source of compensation to be paid to me is:			
	$\blacksquare  \text{Debtor}   \Box  \text{Other } (\textit{specify})$			
4.	■ I have not agreed to share the above-disclosed compens	sation with any other person	unless they are mem	bers and associates of my law firm
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names			
5.	In return for the above-disclosed fee, I have agreed to rende a. Analysis of the debtor's financial situation, and renderin b. Preparation and filing of any petition, schedules, statemer c. Representation of the debtor at the meeting of creditors.	g advice to the debtor in det ent of affairs and plan which	ermining whether to n may be required;	file a petition in bankruptcy;

- d. Other provisions as needed:

Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.

By agreement with the debtor(s), the above-disclosed fee does not include the following services: 6.

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Desc Main Document Page 42 of 51 CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

July 6, 2019	/s/ Nathan Fisher
Date	Nathan Fisher 37161
	Signature of Attorney
	Nathan Fisher
	Name of Law Firm
	3977 Chain Bridge Rd., Suite #2
	Fairfax, VA 22030
	(703) 691-1642

For use in Chapter 13 Cases where Fees Requested Not in Excess of \$5,296 (For all Cases Filed on or after 01/01/2019)

# NOTICE TO DEBTOR(S), STANDING CHAPTER 13 TRUSTEE AND UNITED STATES TRUSTEE PURSUANT TO LOCAL BANKRUPTCY RULE 2016-1(C) AND CLERK'S CM/ECF POLICY 9

Notice is hereby given that pursuant to Local Bankruptcy Rule 2016-1(C), you must file an objection with the court to the fees requested in this disclosure of compensation opposing said fees in their entirety, or in a specific amount, no later than the last day for filing objections to confirmation of the chapter 13 plan.

PROOF	F OF SERVICE
,	egoing Notice was served upon the debtor(s), the standing Chapter 13 trustee the Clerk's CM/ECF Policy 9, either electronically or in paper form (first class  Signature of Attorney

## Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Desc Main Document Page 43 of 51

Fill in	this information to identify your case:				only as d	irected in this form and	in Form
Debto	Charles R Allen		12	2A-1Supp:			
Debto (Spous	or 2 e, if filing)			■ 1. There	s no pres	umption of abuse	
	d States Bankruptcy Court for the: Eastern District of	ł Virginia		applie	s will be n	o determine if a presur	
Case (if know	number /n)			☐ 3. The Me	eans Test	cial Form 122A-2).  does not apply now be service but it could ap	
							ply later.
∩ffi	cial Form 122A - 1			LI CHECK II	uns is a	n amended filing	
		rrant Mai	athly lac	omo			
Cna	apter 7 Statement of Your Cui	rrent Moi	ntniy inc	ome			12/15
attach case n	complete and accurate as possible. If two married people a separate sheet to this form. Include the line number to wumber (if known). If you believe that you are exempted froing military service, complete and file Statement of Exemple.  Calculate Your Current Monthly Income	which the addition om a presumption	nal information a of abuse becau	applies. On the	e top of ai	ny additional pages, writ narily consumer debts o	te your name and or because of
1. V	What is your marital and filing status? Check one or	nly.					
	Not married. Fill out Column A, lines 2-11.						
ı	☐ Married and your spouse is filing with you. Fill o	ut both Columns	A and B, lines	2-11.			
l	☐ Married and your spouse is NOT filing with you.	You and your	spouse are:				
	☐ Living in the same household and are not lega	ally separated.	Fill out both Co	lumns A and	B, lines 2	2-11.	
	☐ Living separately or are legally separated. Fill penalty of perjury that you and your spouse are I living apart for reasons that do not include evading.	legally separated	d under nonbar	kruptcy law	that applie	es or that you and your	
101 the	in the average monthly income that you received from all (10A). For example, if you are filing on September 15, the 6-m 6 months, add the income for all 6 months and divide the total cuses own the same rental property, put the income from that property.	nonth period would Il by 6. Fill in the re	be March 1 thro sult. Do not inclu	ugh August 31 de any income	. If the amo	ount of your monthly incon ore than once. For examp	ne varied during ble, if both
				Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and commission	ons (before all	\$	0.00	\$	
	<b>Alimony and maintenance payments.</b> Do not include Column B is filled in.	payments from	a spouse if	\$	0.00	\$	
f	All amounts from any source which are regularly poof you or your dependents, including child support from an unmarried partner, members of your household and roommates. Include regular contributions from a spifilled in. Do not include payments you listed on line 3.	t. Include regular d, your depende	r contributions ents, parents,	\$	0.00	\$	
1	Net income from operating a business, profession,	or farm					
			otor 1				
	Gross receipts (before all deductions)	\$0.00					
	Ordinary and necessary operating expenses	-\$ 0.00	Copy here ->	<b>c</b>	0.00	\$	
١ .	Net monthly income from a business, profession, or far	m \$0.00	Copy nere ->	ф	0.00	Φ	
6. I	Net income from rental and other real property	Det	otor 1				
(	Gross receipts (before all deductions)	\$ 0.00					
	Ordinary and necessary operating expenses	-\$ 0.00					
	Net monthly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	
	Interest, dividends, and royalties			\$	0.00	\$	

Official Form 122A-1

Case 19-12233-KHK Doc 1 Filed 07/06/19 Entered 07/06/19 15:28:39 Desc Main Document Page 44 of 51

Document Page 44 of 51

Charles R Allen

Case number (if known)

				Colum Debto			Columi Debtor		1
8.	Unemployment compensation			\$		0.00	\$	g oposios	
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	received was a bene	fit under						_
	For you\$	0.	00						
	For you \$ For your spouse \$								
	<b>Pension or retirement income.</b> Do not include any ambenefit under the Social Security Act.			\$		0.00	\$		_
10.	Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hur domestic terrorism. If necessary, list other sources on a total below.	Security Act or paymer manity, or international	nts I or						
	Assistance from family			\$	50	00.00	\$		_
				\$		0.00	\$		_
	Total amounts from separate pages, if any.		+	\$		0.00	\$		_
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total		\$	500.	00	+ \$		_ = \$_	500.00
								Tota	al current monthly
Pari	2: Determine Whether the Means Test Applies to	o You						ilicc	me
	Pr.								
12	Calculate your current monthly income for the year.	Follow these steps:							
	12a. Copy your total current monthly income from line 1	1			Сору	line 11 h	nere=>	\$	500.00
	Multiply by 12 (the number of months in a year)							X	12
	12b. The result is your annual income for this part of the	e form						12b. \$	6,000.00
13	Calculate the median family income that applies to	you. Follow these step	os:						
	Fill in the state in which you live.	VA							
	Fill in the number of people in your household.	1							
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	online using the link s	pecified					13. \\$	61,864.00
14.	How do the lines compare?								
	14a. Line 12b is less than or equal to line 13. O Go to Part 3.	n the top of page 1, ch	eck box	1, <i>The</i>	re is no	presum	ption of a	abuse.	
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	, The pre	esumpti	ion of a	buse is	determine	ed by Form	122A-2.
Part	3: Sign Below								
	By signing here, I declare under penalty of perjury	that the information o	n this sta	atement	and in	any atta	achments	is true and	correct.
	X /s/ Charles R Allen								
	Charles R Allen								
	Signature of Debtor 1								
	Date July 6, 2019  MM / DD / YYYY								
	ואוא אווא אווא אווא אווא אווא איז א א איז א איז א איז א איז איז א איז איז	n 122A-2.							
	If you checked line 14b, fill out Form 122A-2 and fi								
	ii you oncored iine 170, iiii out i oiiii 122A-2 and ii	io it with this lotti.							

Debtor 1

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
<u>+</u> \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Alexandria Emergency Physician P.O. Box 37615 Baltimore, MD 21297

AMCB P.O. Box 37007 Baltimore, MD 21297-3007

AMCB P.O. Box 37005 Baltimore, MD 21297-3005

American Anesthesiology P.O. Box 535386 Atlanta, GA 30353

AR Resources P.O. Box 1056 Blue Bell, PA 19422

Bestpractices P.O. Box 75567 Baltimore, MD 21275

County of Arlington 2100 Clarendon Blvd., Ate. 217 Arlington, VA 22201

ECMC Group 111 Washington Ave South Suite 1400 Minneapolis, MN 55401

Equian P.O. Box 32710 Louisville, KY 40232

Fairfax Anesthesiology Assoc. P.O. Box 18138
Merrifield, VA 22118-0138

Fairfax County Fire & Rescue P.O. Box 18008 Merrifield, VA 22118-0010

Fairfax County Fire & Rescue P.O. Box 630232 Baltimore, MD 21263

GC Services P.O. Box 1022 Wixom, MI 48393

I C System Inc Attn: Bankruptcy P.O. Box 64378 St. Paul, MN 55164

Inova 2990 Telestar Court Falls Church, VA 22042

Inova P.O. Box 37013 Baltimore, MD 21297

Inova Alexandria Hospital P.O. Box 37022 Baltimore, MD 21297-3022

NE Virginia Emergency P.O. Box 37993 Philadelphia, PA 19101

Office of the U.S. Trustee 1725 Duke St., Ste. 650 Alexandria, VA 22314

Pioneer Credit Recovery P.O. Box 92 Arcade, NY 14009

State Farm Auto Insurance c/o McKenry Dancigers Dawson 192 Ballard Court, Ste. 400 Virginia Beach, VA 23462

Suburban Credit Corp P.O. Box 30640 Alexandria, VA 22310 Suburban Credit Corp 6142 Franconia Road P.O. Box 30640 Alexandria, VA 22310

Virginia DMV 2300 West Broad Street P.O. Box 27412 Richmond, VA 23269

Virginia DMV P.O. box 27412 P.O. Box 27412 Richmond, VA 23269-0001

YMCA Alexandria c/o Transworld Systems 500 Virginia Drive, Ste. 514 Fort Washington, PA 19034